Substitute for Form PTO-875   ___INATION RECORD   ___plays a valid OMB control number.

Application or Docket Number: 10 814,373

CLAIMS AS FILED – PART I

Pce 8/8/04

FOR	NUMBER FILED (Column 1)	NUMBER EXTRA (Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
			RATE	FEE		RATE	FE
BASIC FEE (37 CFR 1.16(a))				$			$
TOTAL CLAIMS (37 CFR 1.16(c))	24	minus 20 =					
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5	minus 3 =	x $25 =		OR	x $50 =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			x $100 =		OR	x $200 =	
			+ $180 =		OR	+ $360 =	
* If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL		OR	TOTAL	

CLAIMS AS AMENDED – PART II

AMENDMENT A

4/10/07

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	24	Minus	24	= 0	x $25 =			x $50 =	
Independent (37 CFR 1.16(b))	5	Minus	5	= 0	x $100 =		OR	x $200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $180 =		OR	+ $360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=	x $25 =			x $50 =	
Independent (37 CFR 1.16(b))		Minus		=	x $100 =		OR	x $200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $180 =		OR	+ $360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C

	CLAIMS REMAINING AFTER AMENDMENT (Column 1)		HIGHEST NUMBER PREVIOUSLY PAID FOR (Column 2)	PRESENT EXTRA (Column 3)	RATE	ADDI-TIONAL FEE	OR	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))		Minus		=	x $25 =			x $50 =	
Independent (37 CFR 1.16(b))		Minus		=	x $100 =		OR	x $200 =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $180 =		OR	+ $360 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.